

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101 554049

FILING DATE

10-24-05

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	2					
3	2					
4	2					
5						
6	1					
7	2					
8	2					
9						
10						
11						
12						
13						
14						
15						
16						
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18						
19						
20						
21						
22						
23						
24						
25						
26	1					
27						
28	1					
29	1					
30	2					
31	2					
32	2					
33	2					
34	2					
35						
36	1					
37	1					
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.	38					
TOTAL CLAIMS	41					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						